

ASHRAE Mentor Feedback Survey

Please fill out this survey to assist us in improving the mentoring program in our chapter.

1. Mentoring Type

This year, I acted as a:

- Student Mentee
- YEA Professional Mentee

2. Name: _____

3. E-mail: _____

4. Name of Mentor: _____

5. How often did you communicate with your mentor?

6. With which methods did you communicate with your mentor? (Check all that apply)

- E-mail
- Phone
- In person

7. What were your primary interests in working with your mentor? (Check all that apply)

- Gaining Knowledge about General HVAC Fundamentals
- Gaining Knowledge about Business Management
- Working on my Professional Development
- Networking with colleagues and industry professionals
- Gaining Knowledge of a Specific Industry
- Gaining Knowledge and Experience in Engineering Ethics
- Becoming more involved with ASHRAE
- Other: _____

8. Was your mentor able to provide guidance in your primary areas of interest? If so, what were their greatest attributes? If not, was the mentoring relationship still beneficial?

9. Would you recommend this mentor in the future? Yes No

10. Do you plan to continue to communicate with this mentor? Yes No

11. Please list any additional recommendations for the chapter mentoring program.
